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FROM: Terrie Quillin  
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DATE: April 8, 2005

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NUMBER OF PAGES (including this page):

F&B FILE: 316764

To: USPTO - Central Number

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**MESSAGE****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s): MOORE, Richard F.  
Application No.: 10/795,806

Atty. Docket No.: 316764  
Group Art Unit: 3652

Title: FORKLIFT PROTECTION PAD

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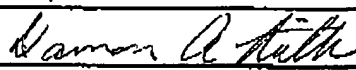
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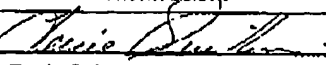
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/795,806
	Filing Date	
	First Named Inventor	Moore, Richard F.
	Art Unit	3652
	Examiner Name	
Total Number of Pages in This Submission	3	Attorney Docket Number 316764

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax Cover Sheet/Certificate of Fax Transmission Under 37 CFR 1.8 (1p)
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Faegre & Benson LLP		
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Date	April 8, 2005	Reg. No.	52,167

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<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/785,808
	Filing Date	
	First Named Inventor	Moore
	Art Unit	3652
	Examiner Name	
	Attorney Docket Number	318764

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☐ A Power of Attorney is submitted herewith.  
OR  
☒ I hereby appoint the practitioners at Customer Number : 35657

☒ Please change the correspondence address for the above-identified application to:

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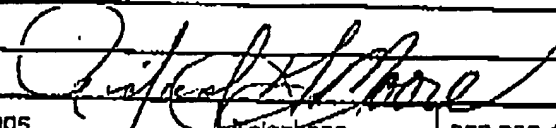
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☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature			
Name	Rick Moore		
Date	April 8, 2005	Telephone	303-285-1151

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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